

Business Apps-Cloud

(One business license supports all business workflows)



Online Payments Integration

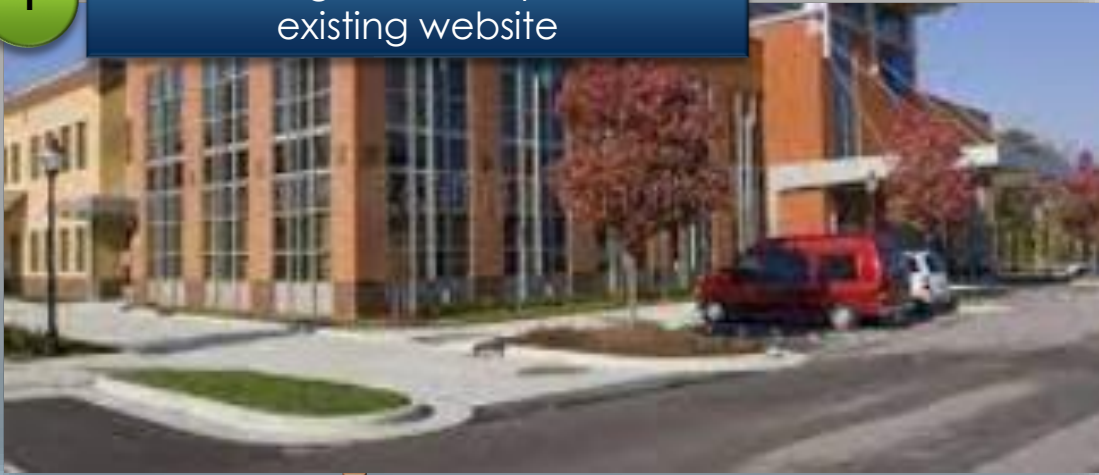


Service Terms:

1. Yearly Cloud License Covers your Service Portal
2. Your business works directly with Stripe Payment Gateway

Online Payments Integration

1 Integrated into your existing website



2

Business Cloud Apps: eForms

Forms Dashboard

Proceed... Close

Secure SSL Entire Workflow

3

Business Cloud Apps: eForms

Forms Dashboard

Home > Available Forms:

PA PAYMENTFORM Select

Multiple Forms – With/without Payments Allowed

4

Online Payment Form

Fill-in Simple Form Mobile-Supported

1. Enter your payment information
2. Pay via our online payment system.
3. You will receive an email confirming your registration.

Please read carefully and agree with the payment terms:

1. Terms...

Payment Amount: *

\$

Payment For: *

--Select-One--

Information:

Payment Comments

Your Full Name *

Cell Phone *

Your Email ID *

Total: \$00.00
Taxes: \$00.00
Payment Total: \$00.00

I Agree and authorize this electronic signature for the submitted document. Please send me an e-mail with this completed document and electronic signature for my record-keeping.

Confirm & Proceed to Pay Cancel

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Online Payments Integration

5

Confirmation Message on Successful Charge

Business Cloud Apps: eForms

Message

Message: Payment Recorded and Charged Customer Successfully!
Payment: MT38019X48
Email Notification Sent Successfully!

Close



6

PCI Compliant Payments Handled By Stripe

stripe Payments

BANK

Confirmation Email to Payee's Email ID

7

Payment Confirmation! Inbox x

GainCloud Systems 8:31 AM (1 minute ago)

to me, info

Doctor Office Name / Doing-Business-As Name 07 March 2022

Payment Confirmation!

Thank you for your online payment. This email confirms that we have received your payment. Please find a copy of paid-up invoice attached for your reference.
Payment: MT38019X48

Doctor Office Name
Email: clinicemail@domainname.com
Phone: 111-222-3333
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f t g+ in

Customized PDF Invoice & Payment Confirmation To Payee's Email ID

8

Doctor Office Logo Here

Invoice / Payment Confirmation!

Doctor Office Name/Doing-Business-As
Our Office Address: 433 Park Avenue,
New York, NY 22100
Phone: 111-222-3333 Email: cloudemail@clinicdomain.com
Website: https://clinicdomain.com

INVOICE # **MT91369X92**
DATE: **03/07/2022**

To
reachanas@gmail.com
Paid via Stripe!

| ITEM | QTY | Rate | Amount |
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